

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

American Association of Nurse Practitioners Foundation Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JOHN D. DINGELSTROM CONGRESS 13912 MICHIGAN AVE DETROIT MI 48126	FED'L CONT. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		\$200.-
RANGER FOR CONGRESS 2000 PO BOX 5577 NEW YORK NY 10027	FED'L CONT. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		\$200.-
Comm. To Retire Ed Tonns 167 FULTON ST Brooklyn NY 11213	FED'L CONT. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		\$200.-
Pete Stark Retire Comm 39300 CINCINNATI DR #200 FREMONT CA 94538	FED'L CONT. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		\$200
Friends of Lot's Oaps PO Box 23940 Santa Barbara Ca 93131	FED'L CONT. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		200.-
Succession - Warren Camp Comm 8665 WILSHIRE BLVD #220 Beverly Hills Ca 90211	FED'L CONT. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		\$200.-
Comm To Retire Nancy Johnson PO Box 1986 New Britain Ct 06053	FED'L CONT. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		\$200.
MUSCLE FOR CANCER Comm PO Box 324 MANCHESTER NH 03257	FED'L CONT. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		\$200.-
UPTON for Rep. 015 PO Box 4902214 St Joseph Mi 49085	FED'L CONT. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		\$200

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)